SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

#### **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) MAY 2 1 2020 Permit #: 6-24-20 \$425 5-21-2020 Amount Paid: Refund:

INSTRUCTIONS: No Checks are made p						Bayfield Co. Z	oning Dept							
DO NOT START CO					D TO AF		Application N	/IUST be sub	mitted	FILL OUT II	NINK (NC	PENCIL)		
TYPE OF PERMIT	r REQUES	TED-▶	X	LAND USE	SAN	ITARY   PRIVY	□ CONDITIO	ONAL LISE	☐ SPECIA	**************************************	chambrolet .	OTHER		
Owner's Name:		, 1	. 0	2,110,001		iling Address:	- CONDITIO	City/State/	Charles and the Colonian Colon	LUSE   B.		elephone:		
KTCHARE	and	Was	dy K	ogers	P	0.BOX 17	3	Mou	W. M.	N. 553	00 9	52-472-637		
Address of Proper	TAR ?	0.000	ALLO	1		City/State/Zip:	2BULL,	1)7	508	270	Ç	ell Phone:		
Contractor:	1711/2 10	eper.	There	7	Con	tractor Phone:	Plumber:	01	770	11 17	6	umber Phone:		
Beau	Mu	MSP	11		3	20-583-450		my	Poll	LOSKI	<u> </u>	amber i none.		
Authorized Agent:	(Person Sig	ning Appli	cation on beha	lf of Owner(s))	Age	nt Phone:	Agent Ma	iling Address	(include Cit	y/State/Zip):		/ritten		
1								•				uthorization ttached		
						T 1D#						Yes 🗆 No		
PROJECT LOCATION	Legal	Descrip	tion: (Use T	ax Statement)		Tax ID# 250	27/6			Recorded Doo		owing Ownership) 503 238		
36 m			Gov't Lot	Lot(s)	CSM	Vol & Page CS	M Doc#	Lot(s) #	Block #	Subdivision:				
<u>5E</u> 1/4, _	36	1/4		100(0)		Tor arage	W DOC #	<b>Σ</b> Οτ(3) #	BIOCK #	Subulvision.				
Santian 1	0 -	nship _	110	tange <u>GG</u>		Town of:				Lot Size	T	Acreage		
Section/	, low	nsnip _	N, R	lange 99	W	OR.	CENTA	, WI	-	7		70		
	Is	Property	/Land withi	n 300 feet of Ri	ver, St	ream (incl. Intermittent)		ructure is fr		ne : Is you	ır Property	Are Method		
Shoreland -	Cree			of Floodplain?		yescontinue -		90			loodplain	Are Wetlands Present?		
3 Toreland	☐ Is I	Property	/Land withi	n 1000 feet of L		ond or Flowage	Distance St	ructure is fr	om Shorelir	ne:	☐ Yes			
					It.	yescontinue -	-			feet	No	No		
☐ Non-Shoreland	d	-												
Value at Time							Total # o							
of Completion				Project		Project	bedroom	Section 2015		hat Type of Sanitary System	Type of Water			
* include donated time		Projec	t	# of Storie						the property		on		
& material							property	<u>/</u>	Will be	on the prope	rty?	property		
	New	ew Construction X1-Story				☐ Basement	□ 1		nicipal/Cit		☐ City			
02	☐ Addi	tion/Al	teration	☐ 1-Story +		☐ Foundation	□ 2	₩ (Ne	(New) Sanitary Specify Type:			XWeⅡ		
\$ 2500				Loft	-		-		itanı (Evic	tal Consider				
16,000	☐ Conv	ersion/	☐ 2-Story			Slab	¥ 3		Sanitary (Exists) Specify Type:					
	☐ Relo	<b>cate</b> (exi	sting bldg)			Y Pilings   Pr				ivy (Pit) or 🗆 Vaulted (min 200 gallor				
		a Busine	ess on		B						ervice contract)			
	Prop	erty			-	▼ Year Round ☐ Compost Toi					et			
	Ш							□ Noi	ne					
Existing Structu					plied f			Width:			Height:			
Proposed Cons	truction:	(overa	ll dimension	is)		Length: 2	\$ 56	Width:	28		Height:	15		
D		1										Square		
Proposed U	JSE					Proposed Struct				Dimens	ions	Footage		
		ZC.				cture on property				( X	)			
			Residenc	e (i.e. cabin, h with Loft	unting	g shack, etc.)				1 56 X	281	1568		
Residentia	l Use			with a Por	-h					( X	)			
				with (2 <sup>nd</sup> ) I		( X	)							
				with a Dec						( X	1.			
☐ Commerci	al Hea			with (2 <sup>nd</sup> ) I						( X	)			
_ commerci	ai USE			with Attac	hed G	arage				( X	)			
š.						sleeping quarters				( x	)			
			Mobile H	ome (manufac	tured o	date)				( x	)			
☐ Municipal	Use		Addition	/Alteration (e.	(plain)					( x	)			
•			Accessor	y Building (exp	olain) <sub>-</sub>					( x	)			
			Accessor	y Building Ad	dition	/Alteration (explain	n)			( X	)			
		. 🗆	Special U	se: (explain)						( X	)			
				aal Heat Joynla						1 4	- ;			

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any leasonable time for the purpose of inspection.

ochud Owner(s): red All Owners must sign or letter(s) a authorization must accompany this application)

19/2020

**Attach** 

Authorized Agent: (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Other: (explain)

**Copy of Tax Statement** If you recently purchased the property send your Recorded Deed

Date

X

olow: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCII Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6)(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% Evenent load

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measureme			Description	Setb Measur		
Setback from the <b>Centerline of Platted Road</b>	470	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)		Feet	
Setback from the Established Right-of-Way	437	Feet		Setback from the River, Stream, Creek	90	Feet	
				Setback from the Bank or Bluff		Feet	
Setback from the <b>North</b> Lot Line	490	Feet					
Setback from the <b>South</b> Lot Line	130	Feet		Setback from Wetland		Feet	
Setback from the West Lot Line	890	Feet		20% Slope Area on the property	☐ Yes	□No	
Setback from the <b>East</b> Lot Line	370	Feet		Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	/	Feet		Setback to Well		Feet	
Setback to <b>Drain Field</b>		Feet					
Setback to <b>Privy</b> (Portable, Composting)		Feet					
Prior to the placement or construction of a structure within ten (10) fee	et of the minimum require	ed setback,	the b	oundary line from which the setback must be measured must be visible from on	e previously survey	ed corner to the	

well

other previously surveyed corner or marked by a licensed surveyor at the owner's expen

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult

to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:	Reason for Denial:							
Permit #: 20-0133	Permit Date: 6-24	1-20							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes (Deed of Recor	ious Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached		No No			
Granted by Variance (B.O.A.)  ☐ Yes ✓ No Case #:		Previously Granted by  Yes No	y Variance (B.O.A.)  Case	e #:					
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No	Stales	Were Property Line	es Represented by Owner Was Property Surveyed	Yes		□ No			
Inspection Record: 5-1 te Stalud. A	ppears ande o	ompliant		Zoning District Lakes Classification		)			
Date of Inspection: 6 - 8 - 20	Inspected by:	& Dodwood	l	Date of Re-Inspe	ction:				
Condition(s): Town, Committee or Board Conditions Atta	ched? 🗆 Yes 🗆 No – (If	No they need to be atta	ached.)			. (			
A Uniform Dwelling Gode	(voc) primit	mist be a	bland from	the locally	Contrae.	ted			
A Uniform Dwelling Code UDC inspection agency prio	r to start of	construction	. must mut	and main	bain se	Hanck			
Signature of Inspector: Irdel Nov wa	ro d			Date of Appro	oval:	1-20			
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees:						

### City, Village, State or Federal rmits May Also Be Required

LAND USE - X
SANITARY - 20-76S
SIGN SPECIAL - Class A
CONDITIONAL BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTUCTION

20-0133 No. Issued To: Richard & Wanda Rogers Less N 1/2 of Location: SE 1/4 of **SE** Section **Township** Range Orienta Town of Gov't Lot Lot Block Subdivision CSM#

For: Residential Use: [1-Story; Residence (56' x 28') = 1,568 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

#### **Todd Norwood**

**Authorized Issuing Official** 

June 24, 2020

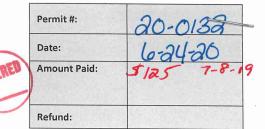
Date

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**





INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

DO NOT START CONS	JINOCTION !	OIALIE	A	IAVE BEEN 153UEL	D TO APP	LICANT.			FILL OUT	IN INK (NC	PENCIL	)	
TYPE OF PERMIT	REQUESTE	D <b>→</b>	LANI	D USE SA	ANITAR	Y D PRIVY	CONDITION	AL USE	☐ SPECIAL	USE 🗆 B.	O.A. 🗆	OTHER	
Owner's Name: Sally A	tnn S	Sti	mac			ing Address: 55 Severson		//State/Zip	:	7	Teleph 507	one: 430 2216	
Address of Property		J 1 1 1	111010	54865		State/Zip:					Cell Ph	one:	
81755 Sev		n A	d Part	Wina WT		ortwing	WI S	7486	5				
Contractor:	VEI 301	1 10	a ion	wing	_		Plumber:				Plumb	er Phone:	
Authorized Agent: (	Person Signin	ng Appli	cation on behal	f of Owner(s))	Agen	nt Phone:	Agent Mailing Ad	ddress (incl	lude City/State,	/Zip):	Writte	n Authorization ed	
					Tax I	D#				Recorded Do		□ <b>No</b> Showing Ownership)	
LOCATION	LOCATION Legal Description: (Use Tax Statement) 37661											570568	
SE 1/4, N	E_ 1/4	1	Gov't Lot	Lot(s)	CSM	Vol & Page   CSI	M Doc # Lot(	(s) No.	Block(s) No.	Subdivision:			
Section 3	, Towns	ship _	49 N, R	ange 9	w	Town of:	nta	,		Lot Size		eage 7. 157	
						eam (incl. Intermittent)	Distance Stru	ucture is f	rom Shoreline	IS P	roperty in	Are Wetlands	
☐ Shoreland →				of Floodplain?		yescontinue	District Control			eet Flood	plain Zone	Present?	
	- IS FIC	репту	/ Lariu Witiiii	1 1000 leet of L		/escontinue>	——————————————————————————————————————	ucture is f	rom Shoreline		□ No	☐ Yes ☑ No	
> Non-Shoreland													
Value at Time							Total # of			FT 15 15 50 1			
of Completion * include		Droio	ct	# of Stor	dos	Foundation	bedrooms			at Type of		Type of Water	
donated time &		Project # of				Foundation	in structure				/Sanitary System  the property?		
material	□ New	Const	truction			☐ Basement	□ 1	☐ Mu	nicipal/City			property  □ City	
¢	☐ Addit	Addition/Alteration				☐ Foundation	□ 2		w) Sanitary	Specify Type	!:		
2,000	☐ Conv			2-Story			□ 3	☐ San	itary (Exists)	e:			
,			existing bldg)	-X · 2.			☐ ☐ Priv		<b>/y (Pit)</b> or		min 200 ga	llon)	
6	☐ Run a Prope		ness on	į.		Use ☐ Year Round	<b>⋉</b> None	☐ Portable (w/service contract)  ★ Compost Toilet					
1		,						t .					
									ne				
Evicting Structure	o. lif narm	it bais			:\		.0	*******					
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The second secon	e	<b>✓</b>				Length: Length: Proposed Structu	ıre		33		Height:	Square Footage	
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Proposed Constru	e	<b>✓</b>	Principal :	Structure (fir	st struc	Length: Length: Proposed Structure on property)	ıre		33	Dimens	ions	Square Footage	
Proposed Constru	e	✓ ✓	Principal :	Structure (fir	st struc	Length: Length: Proposed Structure on property)	ıre		33	Dimens ( /3 X ( X ( X	ions  33 )	Square Footage	
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#### <u>Draw or Sketch your Property</u> (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5) Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (6) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (\*) Wetlands; or (\*) Slopes over 20% (7) Show any (\*):

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measurement
Setback from the Centerline of Platted Road	1)8 45 Fee	o†	Setback from the <b>Lake</b> (ordinary high-water mark)	Feet
Setback from the <b>Established Right-of-Way</b>	Fe	-	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the <b>North</b> Lot Line	80326 Fe	et		
Setback from the <b>South</b> Lot Line	4 +38 Fe	et	Setback from Wetland	Feet
Setback from the West Lot Line 26	3 352 Fe	et	20% Slope Area on the property	☐ Yes ☐ No
Setback from the East Lot Line	b5 Fe	et	Elevation of Floodplain	Feet
Setback to <b>Septic Tank</b> or <b>Holding Tank</b>	Fe	et	Setback to Well	Fe at
Setback to <b>Drain Field</b>	Fe	et		
Setback to <b>Privy</b> (Portable, Composting)	Fe	et		

18 111 ac

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to he other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

				Transfer in the same of the sa					
Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:					
Permit Denied (Date):	Reason for Denial:	eason for Denial:							
Permit #: 20-0132	Permit Date: 6-2	4-26 00							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes   (Deed of Recondance   Yes   Ye	ous Lot(s)) 🗆 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No					
Granted by Variance (B.O.A.)  □ Yes □ No Case #:		Previously Granted by Variance (B.O.A.)  ☐ Yes  No							
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes No					
Inspection Record: owner on - s. te Reb Schiwnan an	and explain	ned project	It to Client.	Zoning District ( 24+) F1 Lakes Classification ( — )					
Date of Inspection: Drive Temp Pern's Ale Inspected by: Told Norwood Date of Re-Inspection:									
Structure Not for hus Water in structure. Mus	ched?   Yes   No-(III man habitation of meet and	No they need to be atta on / sleep. maintain	ng purposes setbacks.	. No pressured					
Signature of Inspector:	00 4			Date of Approval: 6-22-2					
Hold For Sanitary:  Hold For TBA:	Hold For Affic	davit: 🔲	Hold For Fees: 🗌						

wn, City, Village, State or Federal Sermits May Also Be Required

LAND USE - X
SANITARY - Composting Toilet
SIGN SPECIAL CONDITIONAL BOA -

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	20-0	132		ls	ssued	To: Sa	lly St	timac							
Par in Location:	SE	1/4	of	NE	1/4	Section	3	Township	49	N.	Range	9	W.	Town of	Orienta
Gov't Lot	Lot Block				Subdivision						CSM#				

For: Residential Other: [ 2- Story; <u>Residence</u> (13' x 33') = 429 sq. ft.; <u>Porch</u> (33' x 10') = 330 sq. ft.; <u>Deck</u> (33' x 10') = 330 sq. ft. ] Total Overall = 1,089 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure not for human habitation or sleeping purposes. No pressurized water in structure.

Must meet and maintain setbacks. Composting toilet must conform to NSF41 standards and be a certified unit. Maintain toilet per recorded agreement.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

### **Todd Norwood**

**Authorized Issuing Official** 

June 24, 2020

Date